EXHIBIT 9

CAROLE NEWMARK, LCSW

99 Hilltop Acres Yonkers, New York 19704 (914) 964-9239 Email - NewmarkCl@optonline.net

EDUCATION

Master of Social Work - Fordham University, Tarrytown School of Social Work 1997

Certification: LCSW, New York State #055988-1

Bachelor of Science - Behavioral Science with a concentration in Community Health and a 1992

minor in Psychology, Mexcy College - Westchester Campus

SIFI Certification 2001

EMPLOYMENT

Phelos Memorial Hospital, Phelos Counseling Service, 701 N. Broadway, Sleepy Hollaw, New York 10591

Provide psychotherapy to adolescents and adults in hospital based, out-patient mental health service. Responsible for providing intake assessments, psychofherapy and computer documentation, as required by OMH and JACHO. Work closely with in-patient pysch employees to assure that patients are provided with the highest quality of out-patient services upon discharge.

8/21/00-10/27/04

Clinical Social Worker, The Guidance Center, N. Rochelle, N. Y.

Work as part of an interdisciplinary team to provide individual, child and adolescent, group, couples and family psychotherapy. Also, provide social work services in the Therapeutic Nursery for 3 to 5 year olds and their families as part of an early intervention program. Conduct psychological assessments, psychosocial evaluations, develop treatment plans and provide written reports. Responsible for 24-hour emergency coverage of assigned clients, via beeper. Provide supervision for staff, sudent interns, externs, and volunteers, as assigned. Participate in quality assurance activities, assuring accuracy and compliance with JCAHO and OMH.

12/98-8/00

Clinical Family Counselor, PIUS XII, No. Bronx Family Service Cir, Bronx, NY

Provide preventive individual and family psychotherapy for children, adolescents and adults in a community based setting utilizing play and art therapy and a family systems approach. Perform assessments, psychosocial evaluations, develop treatment plans and provide psychotherapy, act as Ilaison between families and outside agencies and schools, including Administration for Children's Services

6/97-12/98

Clinical Social Worker, Lawrence Hospital, Bronxville, NY

Responsible for all social services on Orthopedic and Medical/Surgical units, including parients with altered mental status, substance abuse, psychiatric, chronic illness and HIV/AIDS diagnoses. Previded supportive and crisis counseling to patients and families, assessed and established plans of care to meet psychosocial needs, case management and advocacy to obtain necessary entitlements and community services to expedite appropriate discharge. Coordinated placements to nursing homes, psychiatric treatment facilities, rehabilitation centers, and hospices. Dedicated BR on-call social worker, and provided adult care coordination to clients in the community on a fee-for-services basis. Facilitated a biweekly, evening, caregiver's support group designed to meet the needs of patient's families as well as caregiver's in the community.

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AREAS OF SPECIALIZATION

Depression/anxiety, including all AXIS I and AXIS II diagnoses, elder care.

STUDENT INTERNSHIPS

9/95-5/96 Field Placement #1: Lawrence Hospital, Bronxville, NY

Worked as a multi-disciplinary team member, with terminally ill Oneology patients, and clderly patients and their families. Provided supportive counseling, case management, intervention services, and psychosocial assessments. Followed through in cooperative efforts with other home care interdisciplinary teams, to enable patients to be maintained safely in the community, or discharged to an appropriate facility.

9/94-7/95 Field Placement #2: Family Service Society of Yonkers, Yonkers, NY

Conducted client psychosocial screenings to determine appropriateness for admission to clinic. Maintained caseload of clients for whom assessments, diagnoses (DSM-IV), long and short term goals, interventions, treatment plans and psychotherapy were given. Provided advocacy and case management to a client population that consisted of children, adolescents and adults with issues related to domestic violence, sexual abuse, behavioral problems, substance abuse, HIV/AIDS, depression and family conflicts.

EMPLOYMENT HISTORY

Albert Einstein College of Medicine, Bronk, NY 5/96-12/96

Part-time Research Project Coordinator for children's asthma study.

Starbuck's Coffee Company, Brouxville, NY

Part-time Barista (Management position)

Medical Research Associates, New York Medical College @ Westehester 6/87-2/94

Medical Center, Valhalla, NY

Administrative Coordinator, Pulmonary/Critical Care Division

Travelers Health Network of New York (an H.M.O.) 8/86-6/87

Administrative Assistant to Marketing Saics Manager.

Montefiore Medical Center, Bross NY 7/81-7/86

Administrative Assistant to the Coordinator of Quality Assurance

Montefiore Medical Center, Bronx, NY 3/79-7/81

Administrative Assistant to Assistant Director of Nursing

PROFESSIONAL AFFILIATIONS

National Association of Social Workers (current)



LAWRENCE HOSPITAL CENTER

Lawrence Community Health Services Employment Application

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-related medical condition or disability.

Name: Newmark, Carole Middle
Address 99 Hilltop Acres
Yonkers, N.Y. 10704
City Sinte Zip Code
Social Security: 126-34-3496 Telephone: 914 964-9239
Have you ever worked at Lawrence Hospital Center? Yes No I If Yes, From:
If yes, please identify Name(s), Position: Janice Towers-Service XCO Nevice
regularization - Social Works
Salary Desired: \$75,000 - \$80,000 Bate Available to start work 5 weeks after offe
Schedule Desired (check all that apply) Full-time Part-time Evenings Weekends Days Nights Per Diem Please indicate below the days and times you are available to work.
Monday- Friday @ designated time (8A-4P) Millery Service
Have you ever served in the military? Yes No From: To:
Final Rank Heid? What type of discharge: Honorable Dishonorable If dishonorable, please explain:
A dishonomble discharge is not an absolute bur to employment and other factors will affect the final decision.
Additional Information:
Are you under 18 years of age? Yes No V If yes, please state age
Have you ever been convicted of a crime? Yes \[\] No \[\]
* If yes, usture of crime and disposition:

^{*} Note: Information regarding conviction record will not necessarily bar an applicant from employment, but will be reviewed in light of all surrounding circumstances, including age at time of offense, seriousness, and nature of violation, rehabilitation, relationship of offense to employment and federal statutory requirements.

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	Education & Training	Years of study		Field(s) of study /major(s)		uate	Degree, Certificate, License, etc.
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1	Name					1	
	High School Evander Childs	1959	1963	Commercial	1		Commercial
	Mercy College	1981	1992	Community Health & Payo	1		B.S.
4	Fordham Univ-	1993	1997	Social Work			MSW
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	In progress				Ercp	octed	
	Employment History	with y	indicate all pour current o	periods of full and part-time emp r most recent position. If you req	loyment uiro add	for the	last ten years, starting pace, please ask for
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	City	,	State		Zip	Code	
	New Rochelle		1. W	· -			801
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	Clinical Social W	orker	Marie	-Elena Grossett	- " -	5,1	DOO PET YR.
		g-two	t. ms	ntal health	ينك	ڪند	
	Better Salary + advancement						
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	Bronx N.Y.		N.	7.	<u></u>	I Dase	<u>{ 5 3</u>
		I War	1	Supervisor's Name len O'Hara-Cicel			poo Per YR.
•	Describe Your Daties). _{, 7} ş	ycho	therapy wich	ii ld		adol. 9 adult
	Reason For Leaving	_ ' }	•	* [•	

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Worked for Lawrence Hospital fro	m 697-1298
as hosp. Social worker.	
No break in employment for Past 10	Yrs.
	1
Briefly state why you would be an asset to Lawrence Hospital Center.	
I Can bring my Knowledge of 5.W. 4	human relations
dunamics of lam aformer employee u	The would like to
britis back to Lawrence Hosp. both mue	
	rebnal relationships
	saves 4 administration
C. Lawrence Hospital II will offer loye	the compliance wim issin
statement & strong managenial skills, at	s well as motivational
Referral Source: How did you hear abduly our position? Skills to m	y employees.
☐ Walk-In Applicant ☐ Job Posting Hottine Number	U • •
Community Organization. If so, which organization?	
Employment Agency, If so, which agency	
School/College? Name?	
Other?	
Employee Referral? Name? Denise Galloway	
New York Times	
D Journal News	
Daily News	
☐ Careenbuildors	,
Monster	•
LHC Website	
APPLICANT'S STATEMENT	- 3
AFTEROAM SOLATEMENT	
If I am employed, I agree to abide by the policies of Lawrence Hospital Center.	I understand that my employment is at-
will. This means that I do not have a contract for employment for any particular	
termination in any way. I am free to resign at any time. Similarly, Lawrence l	Hospital Center is free to terminate my
employment at any time for any reason. I understand that Human Resources P	
and may be changed from time to time. All of the information I have supplied in	
statement of the facts, and if employed, any false statement could result in immed	liate dismissal.
Signature: Carele Reconcert LCSW	Date: /- 18-06
Signature, grant Company to Superior	1000. 1-18-00
	\$
LAWRENCE HOSPITAL CENTER'S HUMAN RESOURCES DEPARTMENT	WILL REVIEW ALE APPLICATIONS
AND RESUMES RECEIVED. WE WILL FORWARD ALL APPLICAN	
REQUIREMENTS OF THE POSITION TO THE APPROPRIATE HIRING MA- MANAGER WILL INFORM HR WHOM THEY WOULD LIKE TO INTERVIEW	
LEADING MIND HANDER IN A MODEL THE LEADING THE TOTAL PRANCE AND THE PROPERTY OF THE PROPERTY O	POR THE COMMUNICATION
HUMAN RESOURCES IS NOT ABLE TO RESPOND TO APPLICANTS WHO AF	RE NOT INVITED TO INTERVIEW.
PLEASE NOTE:	
U.S. LAW REQUIRES THAT, IF HIRED, YOU MUST FURNISH APPROPRIATE DO	TIMENTATION

ESTABLISHING <u>IDENTITY</u> AND <u>EMPLOYMENT ELIGIBILITY</u>, WITHIN 72 HOURS OF STARTING WORK.

ACCEPTABLE DOCUMENTS INCLUDE BUT ARE NOT LIMITED TO:

- > A U.S. PASSPORT, CERTIFICATE OF U.S. CITIZENSHIP, CERTIFICATE OF NATURALIZATION OR INS FORM 688 OR 688A.
- > A SOCIAL SECURITY CARD OR BIRTH CERTIFICATE ISSUED BY A GOVERNMENT AUTHORITY AND A DRIVER'S LICENSE, SCHOOL 1.D. WITH PHOTO OR OTHER GOVERNMENT ISSUED DOCUMENTATION ESTABLISHING IDENTITY.

CERTAIN OTHER DOCUMENTS ARE EQUALLY ACCEPTABLE, PLEASE CONSULT A MEMBER OF HUMAN RESOURCES AND ASK THEM FOR A COPY OF INS FORM 1-9 FOR A COMPLETE LISTING.